



Name: _____
 Address: _____
 City/Town: _____ Postal Code: _____
 Phone: _____ Email: _____
 Parish: _____



TOTAL PLEDGE

- \$50 \$75 \$100
 Other \$ _____
 Amount Enclosed \$ _____
 Balance Due \$ _____

Please make cheques payable to:
Bishop's Annual Appeal – 'Name of Parish'

See reverse for Post-dated Cheque, Credit Card and Direct Debit payment information

I would like to direct my gift to:

- | | |
|--|---|
| <input type="checkbox"/> Greatest Need | <input type="checkbox"/> Spiritual Care |
| <input type="checkbox"/> Education | <input type="checkbox"/> Unity |
| <input type="checkbox"/> Pastoral Life & Mission | <input type="checkbox"/> Community Outreach & Justice |
| <input type="checkbox"/> Communications | |

PLEASE RETURN YOUR PLEDGE TO YOUR PARISH

Charitable Registration #836037 127 RR0001

Post-dated Cheques
 _____ (# of Cheques) enclosed for a total of \$ _____

Pre Authorized Debit
 I authorize the Diocese of Saskatoon Catholic Foundation to deduct \$ _____ from my bank account on the 1st day of each month for _____ months, beginning the month of _____.
I've enclosed a blank cheque marked VOID.

Visa **Mastercard**
 I authorize the Diocese of Saskatoon Catholic Foundation to charge \$ _____ to my credit card the 1st day of each month for _____ months, beginning the month of _____.
 Card #: _____ / _____ / _____ / _____ Exp Date: _____
 Signature: _____

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